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APPLICANTS
 Arun Kwangil Iyengar, Yorktown Heights, NY;
 Richard P. King, Scarsdale, NY;
 Lakshmish Macheeri Ramaswamy, Atlanta, GA;
 Daniela Rosu, Ossining, NY;
 Karen Witting, Croton-on-Hudson, NY;

**** CONTINUING DATA *******
 No *gh*

**** FOREIGN APPLICATIONS *******
 No *gh*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 9	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>gh</i> Initials				

ADDRESS
24336

TITLE
System and method for achieving different levels of data consistency

FILING FEE RECEIVED 1518	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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